PTO/SB/21 (09-04)

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1012	al Number of Pages In This Submission										
ENCLOSURES (Check all that apply)											
✓	Fee Transmittal Form Fee Attached	Drawing(s) After Allowance Communication to TC Appeal Communication to Board of Appeals and Interferences									
	Amendment/Reply After Final Affidavits/declaration(s) Extension of Time Request Express Abandonment Request Information Disclosure Statement	Petition Petition Petition to Convert to a Provisional Application Power of Attorney, Revocation Change of Correspondence Address ▼ Terminal Disclaimer Request for Refund CD, Number of CD(s) Landscape Table on CD Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) Proprietary Information Status Letter Other Enclosure(s) (please Identify below):									
	Certified Copy of Priority Document(s) Reply to Missing Parts/ Incomplete Application Reply to Missing Parts under 37 CFR 1.52 or 1.53	Remarks 1. Postcard									
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT											
Firm Name David R Preston & Associates Signature											
Printed name David R Preston											
Date	April 7,20	Reg. No. 38,710									
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PTO/SB/17 (12-04v2) Approved for use through 07/31/2006. OMB 0651-0032

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Effective in 12/08/2004. Fees pursuant to the Cone of the Appropriations Act, 2005 (H.R. 4818).				Complete if Known							
			Application Number 10/		10/679,645						
FEE TRANSMITTAL			Filing Date		October 6, 2003						
For FY 2005				First Named Inv	entor I	Praful Doshi					
Analisant eleime emall	Examiner Name	∍ :	Scott Sugarman								
Applicant claims small	Art Unit	1	2873								
TOTAL AMOUNT OF PAY	Attorney Docke	t No.	PD-00100.P.1.1.1.1								
METHOD OF PAYMENT (check all that apply)											
Check Credit Card Money Order None Other (please identify):											
Deposit Account Deposit Account Number: 501321 Deposit Account Name: David R Preston											
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)											
Charge fee(s) indicated below Charge fee(s) indicated below, except for the filling fee											
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FEE CALCULATION											
BASIC FILING, SEARCH, AND EXAMINATION FEES FILING FEES SEARCH FEES EXAMINATION FEES											
Application Type	Fee (\$)	imall Entity		Small Entity		<u>Small</u>	Entity	Fees Paid (\$)			
Utility	300	<u>Fee (\$)</u> 150	Fee (\$	250	<u>Fee (</u> 200			<u>ι ces ι αια (φ)</u>			
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Design Plant	200		100	50	130						
Reissue	300	100	300	150	160	•	=				
Provisional	200	150 100	500 0	250 0	600 0						
2. EXCESS CLAIM FEES Fee Description Each claim over 20 (including Reissues) Each independent claim over 3 (including Reissues) Each independent claims Multiple dependent claims Total Claims Extra Claims Fee (\$) Fee Paid (\$) HP = highest number of total claims paid for, if greater than 20. Indep. Claims Extra Claims Fee (\$) Fee Paid (\$) HP = highest number of independent claims paid for, if greater than 3. 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof sheets or fraction thereof ach additional 50 or fraction thereof sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof sheets											
Other (e.g., late filing surcharge): 1.20(d) Statutory Disclaimer and 1.17(a)(1) 1 month extension of time 250.00											
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Name (Print/Type) David R Preston